

PTO/SB/06 (12-04)
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-675											Appl	1757	7778
APPLICATION AS FILED - PART ( (Column 1) (Column 2)									SWALL ENTITY			OTHER THAN SMALL ENTITY	
FOR			MUNIBER FILED			ALAMBER EXTRA			RATE (5) FEE (5)		1		
BASIC FEE DT OFR 1.18(x), (b), or (cf)		400			$\neg$			1	KA-E (a)	150	1	RATER	FEE(5)
SEARCH FEE (D7 CPR L18()), (), or (m))								1		100	1	<b></b>	
EXAMPLATION FEE (37 CFR 1.18(d), (p), or (d))							<del></del>	l		248	1	<b></b>	
TOTAL CLAIMS CIT CFR 1.18(0)		$\neg \neg$	37	mbrus :	· .	. 17	,	1	х -	<del>                                     </del>	1 _		
PROEPENDENT CLAIMS (37 CFR 1.18(N))		AIMS	<del></del>	5 minus - 2				1		┪┈╶──	OR.	× •	<del> </del>
API FEI	LICATION SIZE		If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						X -			x •	
MILITPLE DEPENDENT CLAIM PRESENT (17 CFR 1.16(1)													
"If the difference in column 1 is less than zero, enter 'V' in column 2.									TOTAL		}	TOTAL	
APPLICATION AS AMENDED - PART (1)  (Column 1) (Column 2) (Column 3)									SMALL	ENTITY	- OR	OTHER SMALL	
AMENDMENT A	, , , ,	REN	LADIS LABNING FTER NOMENT		PRE	CHEST UMBER VIOUSLY LID FOR	PRESENT EXTRA		RATE (S)	ADDI- TIONAL FEE (1)		RATE (5)	ADDI- TIONAL FEE (8)
	Total promitting	. (	15_	Minus,	1	Ø	25		x =	625	OR.	x •	7=2(4)
	prora number	. 4	3	Minus		Ø	•5		x =	500	OR	X -	
3	Application Stzs Fee (37 CFR 1:18(s))												
	RRST PRESENTATION OF MILITIPLE DEPENDENT CLAIM (37 CFR 1.16(1))									180	OR		
									TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)													
MENDMENT B		REM	AIMS AIMING TER IDMENT		PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE (3)	ADDI- TIONAL FEE (8)		RATE (3)	ADOL- TIONAL PEE (\$)
	Total (2) CFR 1,14(3)			Minus	-		•		x -		OR	x •	
X	prora unop	•		Minus	800		=	ſ	x -		OR	x .	
₹	Application Size Fee (37 CFR 1.16(e))							Ī			<b></b>		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,160)										OR		
• If the entry in column 1 is tess than the entry in column 2, write "0" in column 3.									TOTAL ADO'L FEE		OR	TOTAL ADD'L FEE	
_	I the "Highest h	tumber i Aunber i	Proviously Previously	Paid For Patri For	DI THI M THI	is space i	s less than 20,	inte	-	the appropriate	bar in c	rikmo 1	

This collection of information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application from to the USPTO. There will vary depending upon the individual case. Any comments on the amount of time you require to corrupted this form ender suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.